PTO/SB/30 (10-01)

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Application REQUEST 10/820,695 Number **FOR** Filing Date CONTINUED EXAMINATION (RCE) April 9, 2004 First Named TRANSMITTAL Inventor Peters Art Unit ommission for Patentsپر 1751 **Box RCE Examiner Name** Washington, DC 20231 Gregory R. Delcotto Attorney Docket AIRP.0001 Number This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plan application filed prior to June 8, 1995, or to any design application. See instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2. Submission required under 37 CFR 1.114 a. □ Previously submitted i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on iii. Other i. 🗵 Response/Preliminary Amendment ☐ Information Disclosure Statement (IDS) ☑ Petition for 3-month Extension of Time 2. Miscellaneous ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) □ Other 3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The Director is hereby authorized to charge any additional fees, or credit any overpayments to Deposit Account No. 08-1480 ■ RCE fee required under 37 CFR 1.17(e) ii. Extension of time fee (37 CFR 1.136 and 1.17) iii. Other: excess claims fee ☑ Checks in the amount of \$790.00 for the RCE fee and \$1,020.00 for the 3-month extension fee are enclosed ☐ Payment by credit card (Form PTO-2038 enclosed) Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Name (Print/Type) Juan-Cartos A. Marguez Registration NO. (attorney/agent) 34,072 Name (Print/Type) Stanley/P/Fisher/ Registration NO. (attorney/agent) 24,344 Signature Date May 29, 2007 CERTHEICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the United

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Tradearmk Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.

Date

States and Trademark Office on the date shown below.

Name (Print/Type) Signature

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THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
PETERS et al.)
Application Number: 10/820,695) Art Unit 1751)
Filed: April 9, 2004) Examiner Gregory R. Delcotto
For: PROCESS AND APPARATUS FOR REMOVING RESIDUES FROM THE MICROSTRUCTURE AN OBJECT)))
Attorney Docket No. AIRP.0001)

Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

For .	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	18	15	XXX (Over 20)	x \$50	Ó
Independent Claims	5	5	(Over 3)	x \$200	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$360	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28).					
			TOTAL		0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[x] Response to Office Action	[x] Petition for Extension of Time (3 months)
(w/claim amendments)	[] Terminal Disclaimer
[] Substitute Specification	Letter to Draftsperson w/_ sheets of
[] Preliminary Amendment	replacement drawings
[] Information Disclosure Statement	[x] Request for Continued Examination
w/PTO Form 1449 & refs.	

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[]	Please charge my Deposit Account Number in the amount of to cover the fees for A duplicate copy of this paper is enclosed.
[x]	Checks in the amount of \$790.00 to cover the RCE fee and \$1,020.00 for the three-month extension fee are enclosed.
[x]	The Commissioner is hereby authorized to charge any additional fees associated with this communication, including fees under 37 C.F.R. § 1.16 and 1.17, or credit any overpayment to Deposit Account Number 08-1480 .
	Respectfully submitted,
	Stanley P. Fisher
	Registration Number 24,344
	Juan Carlos A. Marquez
	Registration No. 34,072

REED SMITH LLP

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3110 Fairview Park Drive Suite 1400 Falls Church, Virginia 22042 (703) 641-4200 May 29, 2007